

**PATENT APPLICATION FEE DETERMINATION RECORD**

**Supplement to Form PTO-875**

**Application or Doctor Number**

8-82732

*W.L. DeMolay*

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#### **OTHER THAN**

**CLAIMS AS FILED - PART I**

(Column 1) : : : (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(h))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 -	-
INDEPENDENT CLAIMS (37 CFR 1.16(d))	minus 3 -	-
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))

If the difference in column 1 is less than zero, enter 'W' in column 2.

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEES		RATE	FEES
$X 1$ _____	=	OR	$X 1$ _____	=
$X 2$ _____	=	OR	$X 2$ _____	=
$+ S$ _____	=	OR	$+ S$ _____	=
<b>TOTAL</b>		OR	<b>TOTAL</b>	

**CLAIMS AS AMENDED - PART II**

4-25-06

(Caption 1)

(Section 21) (Section 21)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total 07 OPR 1,142	20	20	1
Independent 07 OPR 1,140	3	3	-

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 87 CFS L1482

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X <u>25</u>			X <u>50</u>	
X <u>100</u>			X <u>200</u>	
+ <u>180</u>			+ <u>360</u>	
TOTAL ADDITIONAL FEE			TOTAL ADDITIONAL FEE	

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(Column 1)		(Column 2)	(Column 3)
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total 127 CFR 1.16(a)	20	10	1
Independent BY DRAFT	3	3	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l)(1))

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
\$ 35.		\$ 50.	
\$ 100.		\$ 200.	
\$ 180.		\$ 300.	
TOTAL ADD'L FEE		TOTAL ADD'L FEE	

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{Collected 11}

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	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESIDENT EXTRA
Total (§ 1.10(d))		Mitus	***	-
Independent (§ 1.10(p))	*	Mitus	***	-

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS 37 CFR 1.16(d)

RATE	ADDITIONAL FEE	
<u>25.</u>		
<u>100.</u>		
<u>100.</u>		
TOTAL DOL FEE		

  

RATE	ADDITIONAL FEE	
X <u>50.</u>		
X <u>300.</u>		
+ <u>310</u>		
TOTAL ADOL FEE		

If the entry in column 1 is less than the entry in column 2, write "10" in column 3.  
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
**The Highest Number Previously Paid For** (Total or independently) to the highest number found in the appropriate box in column 1.

A collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the end by the TO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, and by gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-870-8199 and select option 2.